

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES
(Schedule E)

 PAGE 1 OF 4
 FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) Tea Party Forward	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00608166 </div>
Check if <input checked="" type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name of Payee Connell Donatelli, Inc.			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between;"> <div>MM / DD / YYYY 03 / 10 / 2016</div> </div>		
Mailing Address P.O. BOX 1877			Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">200.00</div>		
City Alexandria	State VA	Zip Code 22313	Transaction ID : SE.12345 Date of Disbursement or Obligation <div style="display: flex; justify-content: space-between;"> <div>MM / DD / YYYY 03 / 10 / 2016</div> </div>		
Purpose of Expenditure DIGITAL ADVERTISING		Category/ Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">004</div>	Name of Federal Candidate RAFAEL EDWARD TED CRUZ		
<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose		Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: <u>NC</u>			
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block;">200.00</div>			Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ► _____		

Full Name of Payee Connell Donatelli, Inc.			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between;"> <div>MM / DD / YYYY 03 / 10 / 2016</div> </div>		
Mailing Address P.O. BOX 1877			Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">200.00</div>		
City Alexandria	State VA	Zip Code 22313	Transaction ID : SE.12345_B Date of Disbursement or Obligation <div style="display: flex; justify-content: space-between;"> <div>MM / DD / YYYY 03 / 10 / 2016</div> </div>		
Purpose of Expenditure DIGITAL ADVERTISING		Category/ Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">004</div>	Name of Federal Candidate RAFAEL EDWARD TED CRUZ		
<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose		Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: <u>FL</u>			
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block;">200.00</div>			Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ► _____		

(a) SUBTOTAL of Itemized Independent Expenditures..... ►	<div style="border: 1px solid black; padding: 2px; display: inline-block;">400.00</div>
(b) SUBTOTAL of Unitemized Independent Expenditures ►	<div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>
(c) TOTAL Independent Expenditures..... ►	<div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Dan Backer
[Electronically Filed]

Date

MM / DD / YYYY
03 / 10 / 2016

Signature

: 97 `A-G79 @G B9CI G`H9LH`F9 @G H98 `HC`5 `F9DCFHŽG7 <98I @G `CF`+H9A-N5HCB
.

Form/Schedule: SE
Transaction ID : SE.12345

This Committee is expending \$1,000 to broadly target the 5 identified states in this report: North Carolina, Florida, Ohio, Illinois, and Missouri. There is no way to be sure, however, how much if any of the budget will be spent in any one particular state. To err on the side of caution and abundant public disclosure, this Committee has chosen to report its independent expenditures now.

Form/Schedule:
Transaction ID:

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES
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FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) Tea Party Forward		FEC IDENTIFICATION NUMBER ▼ C C00608166
Check if <input checked="" type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on		MM / DD / YYYY

Full Name of Payee Connell Donatelli, Inc.		Date of Public Distribution/Dissemination MM / DD / YYYY 03 / 10 / 2016
Mailing Address P.O. Box 1877		Amount 200.00
City Alexandria	State VA	Zip Code 22313
Purpose of Expenditure DIGITAL ADVERTISING	Category/ Type 004	Transaction ID : SE.12345_B_B Date of Disbursement or Obligation MM / DD / YYYY 03 / 10 / 2016
Name of Federal Candidate RAFAEL EDWARD TED CRUZ		Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: OH
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶

Full Name of Payee Connell Donatelli, Inc.		Date of Public Distribution/Dissemination MM / DD / YYYY 03 / 10 / 2016
Mailing Address P.O. Box 1877		Amount 200.00
City Alexandria	State VA	Zip Code 22313
Purpose of Expenditure DIGITAL ADVERTISING	Category/ Type 004	Transaction ID : SE.12345_B_B_B Date of Disbursement or Obligation MM / DD / YYYY 03 / 10 / 2016
Name of Federal Candidate RAFAEL EDWARD TED CRUZ		Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: IL
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	400.00
(b) SUBTOTAL of Unitemized Independent Expenditures ▶	
(c) TOTAL Independent Expenditures..... ▶	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Dan Backer

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Date

MM / DD / YYYY
03 / 10 / 2016

Signature

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NAME OF COMMITTEE (In Full) Tea Party Forward		FEC IDENTIFICATION NUMBER ▼ C C00608166
Check if <input checked="" type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on		MM / DD / YYYY

Full Name of Payee Connell Donatelli, Inc.		Date of Public Distribution/Dissemination MM / DD / YYYY 03 / 10 / 2016
Mailing Address P.O. BOX 1877		Amount 200.00
City Alexandria	State VA	Zip Code 22313
Purpose of Expenditure DIGITAL ADVERTISING	Category/ Type 004	Transaction ID : SE.12345_B_B_B_B Date of Disbursement or Obligation MM / DD / YYYY 03 / 10 / 2016
Name of Federal Candidate RAFAEL EDWARD TED CRUZ		Office Sought: <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: MO
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶

Full Name of Payee Connell Donatelli, Inc.		Date of Public Distribution/Dissemination MM / DD / YYYY 03 / 04 / 2016
Mailing Address P.O. Box 1877		Amount 250.00
City Alexandria	State VA	Zip Code 22313
Purpose of Expenditure DIGITAL ADVERTISING - NATIONALLY DISTRIBUTED	Category/ Type 004	Transaction ID : SE.12345_B_B_B_B_B Date of Disbursement or Obligation MM / DD / YYYY 03 / 04 / 2016
Name of Federal Candidate RAFAEL EDWARD TED CRUZ		Office Sought: <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: _____
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input checked="" type="checkbox"/> Other (specify) ▶ Convention

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	450.00
(b) SUBTOTAL of Unitemized Independent Expenditures ▶	
(c) TOTAL Independent Expenditures..... ▶	1250.00

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Dan Backer

[Electronically Filed]

Date

MM / DD / YYYY
03 / 10 / 2016

Signature